



Commonwealth  
of Massachusetts

Center for Health  
Information and Analysis

# All Payer Claims Database Data Volume Reports

2008 - 2012

March 2013

The Commonwealth of Massachusetts established an All Payer Claims Database (APCD) in 2010 as one of the largest data collection efforts undertaken by the state. Regulation 114.5 CMR 21.00, Health Care Payer Claims Data Submissions, requires health insurance payers to submit medical, pharmacy, and dental claims, as well as information about member eligibility, benefit design, and providers to the Center for Health Information and Analysis (CHIA) for Massachusetts residents. The goals of the APCD are to provide administrative simplification to payers and to provide access to timely, accurate, and relevant data for improving quality, mitigating costs, and promoting transparency in the health care delivery system.

The charts below depict the number of records submitted to the Center as of December 2012 by health insurance payers. These Data Volume Reports are a concise way of presenting the amount of APCD data collected by year and file type.

Please feel free to submit any questions related to the reports to the Center's APCD mailbox: [CHIA-APCD@state.ma.us](mailto:CHIA-APCD@state.ma.us).

Thank you for your interest in the All Payer Claims Database.

Commonwealth of Massachusetts-Center for Health Information and Analysis (CHIA)  
 APCD Data Volume Reports 2008-2012 (based on data received by 12/19/2012)

United Healthcare Insurance Company - OptumHealth Dental														
File Type*	Submission Year	January	February	March	April	May	June	July	August	September	October	November	December	Total
PR	2010	0	0	0	0	0	0	0	0	0	0	0	1,283	1283
PR	2011	0	0	1,289	0	1,433	1,317	0	0	1,346	0	0	1,391	6776
PR	2012	0	0	1,363	0	1,336	1,340	0	0	1,348				5387
ME	2009	0	0	0	0	0	0	0	0	0	0	0	396,598	396598
ME	2010	0	0	0	0	0	0	0	0	0	0	0	379,618	379618
ME	2011	378,533	375,796	392,778	361,591	357,758	351,648	351,877	347,746	317,101	342,250	340,761	317,101	4,234,940
ME	2012	316,867	312,171	303,775	303,775	296,669	289,259	286,928	282,678	280,798	278,362			2,951,282
PV	2011	6,866	6,517	6,717	6,618	16,314	6,547	6,455	6,430	6,339	6,162	6,250	6,366	87,581
PV	2012	6,355	6,441	6,499	6,407	6,508	6,877	6,458	6,741	6,816	6,771			65,873
MC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2012	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2012	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2008	21,495	24,987	26,637	30,097	28,691	26,018	25,565	26,072	23,266	28,414	25,683	24,805	311,730
DC	2009	24,885	28,118	29,045	29,975	29,464	29,713	29,900	28,321	29,306	30,847	26,692	31,538	347,804
DC	2010	26,640	27,835	32,787	31,505	28,775	30,389	28,412	27,872	27,559	29,038	27,104	32,176	350,092
DC	2011	23,920	21,314	28,568	25,384	22,670	22,361	19,663	19,060	17,785	18,706	19,737	21,368	260,536
DC	2012	25,758	18,293	21,202	18,402	19,923	20,437	18,053	18,240	15,247	15,557			191,112

\*Key: PR=Product Records; ME=Member Eligibility Records; PV=Provider Records; MC=Medical Claim Lines; PC=Pharmacy Claim Lines; and DC=Dental Claim Lines.

**The Volume Report presents the APCD inventory as of December 2012 and reflects the related compliance requirements:**

- Medical, pharmacy, and dental submissions are required monthly beginning January 2008.
- Provider submissions are required monthly beginning January 2011. The May 2011 submission contains historical records from 2008 through May 2011.
- Product submissions are required quarterly beginning December 2010. The May 2011 submission contains historical records from 2008 through 2010 plus 2011, quarter one.
- Member eligibility submissions are required monthly beginning in January 2011. Prior to 2011, payers were required to submit two eligibility files: a December 2009 eligibility submission covering calendar years 2008 and 2009, and a December 2010 eligibility submission covering calendar years 2009 and 2010. Eligibility files contain data for twenty-four months of member eligibility.
- The APCD liaisons monitor and enforce compliance rules and authorize exceptions. Some carriers have incomplete data due to: exemptions from filing, limited claim or member base, phasing into APCD and are currently in testing or ramping up their production data filings, are in the process of updating specific submissions, and /or non-compliance.

**These numbers represent the number of records submitted, not actual counts of members, providers, products or claims.**







